## STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
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COVER PAGE

ease type or print in ink.	ZUID MEN -3 FM 1.00	
ME OF FILER (LAST) (FIRST)	(MIDDLE)	
KNIGHT CHRIS	OPHER	
Office, Agency, or Court		
Agency Name (Do not use acronyms)		
NATURAL RESOURCES	ENGINEERING GEOLOGIST YOUR Position GEOTHERMAL RESOURCES	
Division, Board, Department, District, if applicable	Your Position	
DIVISION OF OIL, GAS	GEOTHERMAL RESOURCES	
▶ If filing for multiple positions, list below or on an attachment. (Do n	not use acronyms)	
Agency:	Position:	
Agency,	- FOSILIOII.	
. Jurisdiction of Office (Check at least one box)		
X State	☐ Judge or Court Commissioner (Statewide Jurisdiction)	
Multi-County	County of	
☐ City of		
. Type of Statement (Check at least one box)		
Annual: The period covered is January 1, 2017, through December 31, 2017.	Leaving Office: Date Left/(Check one)	
The period covered is/, through December 31, 2017.	ough   The period covered is January 1, 2017, through the date of leaving office.  -or-	
Assuming Office: Date assumed/	The period covered is/, through the date of leaving office.	
Candidate: Date of Election and office s	sought, if different than Part 1:	
Cabadula Summary (must complete)		
<ul> <li>Schedule Summary (must complete) ► Total null Schedules attached</li> </ul>	mber of pages including this cover page:	
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions – schedule attached	
Schedule A-2 - Investments – schedule attached	Schedule D - Income - Gifts - schedule attached	
Schedule B - Real Property - schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached	
=0r=	The state of the s	
☒ None - No reportable interests on any schedule		
5. Verification		
MAILING ADDRESS STREET CI (Business or Agency Address Recommended - Public Document)	ITY STATE ZIP CODE	
DOGGR 4800 STOCKDALE H	WY. BAKERFIELD, CA., 93309	
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS Christopher. Knight @ Conserva	
(661) 520-2878		
herein and in any attached schedules is true and complete. I acknow	e reviewed this statement and to the best of my knowledge the information contained wledge this is a public document.	
I certify under penalty of perjury under the laws of the State of C	California that the foregoing is true and correct.	
Date Signed 3/30/18	Signature Christopher Knight	
(month, day, year)	(File the originally signed statement with your filing official.)	